



COGNIZANT MEDICARE & MEDICAID SOLUTIONS

Leading the industry with advanced Medicare Advantage and Medicaid Capabilities

Our comprehensive Medicare and Medicaid solutions and products enable your organization to lead the market with efficient claims processing, automated enrollment, encounter management, quality reporting and member-centric care management.

Changes in government healthcare businesses are presenting new challenges and opportunities to the payers serving this critical market. Health plans are preparing for rapid growth while coping with budgets in crisis, and long-term business success will depend on the ability to meet healthcare reform requirements and increase efficiencies.

Cognizant's comprehensive Medicare and Medicaid solutions and products enable your organization to lead the market with efficient claims processing, automated enrollment, encounter management, quality reporting and member-centric care management.

Processing more than 30 percent of the nation's managed Medicare lives and over 60 percent of the nation's managed Medicaid lives on TriZetto core administration systems, Cognizant has the experience and capabilities to help you adapt and respond quickly to changes in regulatory requirements. When combined with Cognizant's depth and breadth of Services, our Medicare Solutions can help you lower administrative costs, increase speed to market and decrease total cost of ownership.

Effective, Reliable Solutions for Government Health Plans

The Facets™ and QNXT™ Core Administrative Systems: We offer two flexible, scalable core administrative systems to address the wide scope of your business needs. Both Facets™ and QNXT™ platforms offer deeply integrated functionality that continues to be enhanced as Medicare and Medicaid operational and reporting requirements evolve. These systems help you respond quickly to changes and embrace new opportunities with increased efficiencies, greater automation, and value-based benefit programs that prepare your plan to meet the demands of tomorrow's Government Programs.

CareAdvance Enterprise®: For identification, prioritization, and management of members with ongoing health challenges, the CareAdvance Enterprise application provides a secure, Web-based member-centric communication platform for automation of care management programs, member engagement, intervention and education. The



solution streamlines utilization, case, and disease management, helping payers meet federal and state quality improvement initiatives.

Encounter Data Manager™: This application interfaces with other applications and key data sources to generate and edit the required encounter data submissions for Medicaid and Medicare. These data sources include core claims processing systems, data warehouses, and pharmacy or dental programs.

NetworX for Medicaid and Medicare®: The NetworX Suite® for Medicaid and Medicare automates the pricing of claims with respect to diverse fee schedules and complex provider contracts. The solution quickly models provider contracts against state Medicare fee schedules and analyzes the impact of yearly changes.

ClaimSphere HEDIS: ClaimSphere HEDIS is a NCQA certified HEDIS platform that helps organizations plan, monitor, intervene and improve HEDIS scores, while enabling a deeper understanding of their members to deliver better care and reduce costs. Built upon an evidence-based rules engine, ClaimSphere HEDIS is supported by a robust analytical toolset that enables payers to generate the actionable insights they need to identify and close gaps in care and improve quality scores.

Comprehensive Medicare Solutions



Enrollment Administration Manager: Our enrollment application supports accurate Medicare Advantage and Part D enrollment, including data collection, maintenance and submission to CMS. Our technology and streamlined solution enhances and automates the overall enrollment process to support your operational goals and the needs of your members.

Financial Reconciliation Manager: Helping Medicare plans identify, track and resolve factors that might cause payment discrepancies in Part C or Part D reimbursement is the primary function of our Financial Reconciliation Manager. The solution enables your reconciliation analysts through accelerated workflow, increased efficiency and reduced costs in supporting resolution and financial management.

HCC Risk Adjustment Manager: Our Risk Adjustment solution helps Medicare payers optimize revenue through improved data collection, allowing them to increase the accuracy of risk scores and, thereby increase the accuracy of payments. To help Medicare plans optimize revenue, the solution automates key processes, from the assessment of member data through the creation of reports that support RADV audits.

PDE Data Manager: Our PDE Management application can capture and load DDPS PDE reply reports produce PDE data for submission and track stats and error codes to efficiently resolve discrepancies, re-submit rejected data and track submissions.



Risk Score Manager: Risk Score Manager provides trending analysis and reconciliation capabilities for calculating risk scores, by member, from the RAPS response files. The solution reconciles risk scores at the HCC level against CMS risk scores from the MMR and MOR files. This tool also assists in forecasting of revenue based on risk scores.

Rx Reconciliation Manager: Our pharmacy reconciliation solution combines accepted drug event data from the PDE Data Manager system with member demographic and payment information in order to calculate and track low-income subsidy, reinsurance and risk-share retroactive reconciliation amounts.

StarSERV: Our StarSERV Star Rating analytics solution assists plans through accelerating proactive identification and improved understanding of quality and performance ratings. With detailed information about specific measures, you'll have the knowledge needed to improve ratings and increase payments. The StarSERV platform offers a robust Medicare Star rating solution built around the key constructs of analytics. It is designed to drive collaboration and automation, and enable plans to prioritize measures and cohorts, set up achievable quality initiatives, roll out campaigns and provider scorecards, and monitor their progress toward improving Star ratings.



Services to Support All of Your Government Lines of Business

Regulatory Intelligence Services: CMS Compliance Audit Readiness Services deliver CMS audit preparation and testing, clinical decision making review and mock CMS case file audit webinars. This service helps Medicare Advantage and Part D plans understand what is required, foresee potential issues, and reach compliance goals.

Business Consulting, IT and Advisory Services: From strategy and planning to implementation and optimization, our comprehensive portfolio of IT and systems integration services help you adopt new business models, seize new market opportunities and enable technology innovation.

- Systems Integration
- Migration
- Portals
- Program Management
- Requirements
- Testing



Business Process Services: Our industry specific business process expertise can help you redirect and refocus valuable resources giving you the financial flexibility required to focus on core competencies and innovate for the future.

- Configuration
- Enrollment
- Intelligent Process Automation
- Front-end Processing
- Billing
- Global Clinical Services
- Claims Administration
- Customer Service
- Credentialing

Infrastructure Services: We offer the consulting, managed services, resources and capabilities you need to assess, design, build and manage a flexible IT environment.

- Availability Services
- Business Cloud Solutions
- Integrated Value Management
- Productivity Services
- Data Management Services
- Application Management
- Connectivity Services

For more information about how we will help your organization compete successfully in Medicare, Medicaid and the Duals marketplace, contact us at CMediMediSGO@Cognizant.com or visit www.cognizant.com.



About Cognizant

Cognizant (NASDAQ: CTSI) is a leading provider of information technology, consulting, and business process outsourcing services, dedicated to helping the world's leading companies build stronger businesses. Headquartered in Teaneck, New Jersey (U.S.), Cognizant combines a passion for client satisfaction, technology innovation, deep industry and business process expertise, and a global, collaborative workforce that embodies the future of work. With over 100 development and delivery centers worldwide and approximately 218,000 employees as of June 30, 2015, Cognizant is a member of the NASDAQ-100, the S&P 500, the Forbes Global 2000, and the Fortune 500 and is ranked among the top performing and fastest growing companies in the world. Visit us online at www.cognizant.com or follow us on Twitter: Cognizant.

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